## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			17				R/	NTE.	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			17 minus 20=		* Ø		X	S 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		* O		X	12=		OR	X84=		
ML	JLTIPLE DEPEN	DENT CLAIM P	RESENT				+1	40=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			ТС	TAL		OR	TOTAL	740.00		
	relt ? c	LAIMS AS A (Column 1)	MENDED - PART II (Column 2) (			(Column 3)	SM	SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	XS	9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus	***	T CLAIM	=	X	12=		OR	X84=		
<u> </u>	I MOT PRESE	IVIATION OF MI	OLITICE DEF	LINDLIN	CLAIN		+1	40=		OR	+280=		
										OR	TOTAL ADDIT. FEE		
		,	r. FEE										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE -	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	- 01 1111	=	X	2=		OR	X84=		
┞	THIST PHESE	JUIPLE DEF	TIPLE DEPENDENT CLAIM			+140=		-	OR	+280=			
								OTAL			TOTAL		
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												<del></del> *	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AIM	=	X4	2=		OR	X84=		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OB	TOTAL		
	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												